10008194

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

1001-066

CLAIMS AS FILED - PART I (Column 1) (Column						ımn 2)		SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			32		:			RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			3 2 minus 20=		*	12		X\$ 9=		OR	X\$18=	216
INC	DEPENDENT C	LAIMS	2. minus 3 =		*	C		X42=		OR	X84=	
Μt	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				┚╏	+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0"			column 2	ł	TOTAL		OR	TOTAL	956
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)) <u> </u>	SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 30	Minus	** 3	, ۲	= / /	1 L	X\$ 9=		OR	X\$18=	
AME	Independent	* 3 NTATION OF MI	Minus	PENDENT	CLAIM	- /	↓ L	X42≃ .		OR	X84=	
	THO THEOL	STATION OF MI	JETH LE DE	LINDLIN	CLANIV		4 [+140=		OR	+280=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	F-100-17 17 100-17-10 MAY 1.0 AMERICAN	(Column 1)		(Colur		(Column 3)						
AMENDMENT B	4.10- 1	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	C) AMA	-	1 [X42=		OR	X84=	
	ringi Prese	INTATION OF ME	JETIPLE DEF	PENDENT	CLAIM	U_	J	+140=		QR	+280=	
							L	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)		00/1 CL		•	NODII.I CE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	IJſ	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	11	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												